



Good News!!!! The Office of EMS and Trauma has been awarded \$326,684 in federal grant funds to purchase pediatric equipment for licensed ALS services. The equipment includes pediatric back boards, inflatable car seats and Broselow tapes. Qualifying services will be notified by letter regarding equipment pick-up site and dates. The amount of equipment that each service receives will be based on the latest licensure data that we have available. Please note that services are responsible for the pick up of their equipment at the time specified in the letter. Any equipment not picked up at the delegated times will be re-assigned. Keep an eye open for your notification letter and don't miss your opportunity for FREE equipment!

DIRECTOR'S WORDS

During the recent Southeast AL EMS Conference, I had the opportunity to talk with a number of EMS providers. I have to say that I continue to be impressed with Alabama's EMS community and the level of commitment to patient care. I always enjoy meeting members of our EMS community. Great job, Denise Smith and Wes Etheridge!

A number of you have asked about the status of the proposed EMS legislation. To date, it has not been submitted. Hopefully, it will be submitted during the next legislative session. The latest version is on our Web site, www.adph.org/ems.

I mentioned in our last newsletter that we have given the regions additional funding to provide Pediatric Education for Prehospital Personnel (PEPP) training. If you're interested, please contact your regional EMS office for additional information.

In an effort to address some of your training needs, we've also been working with our video communication experts here at ADPH. We're currently working toward offering training opportunities for EMS providers via webcast on our Web site.

As I've said before, our objective with this newsletter is to improve communications from our office to you, the EMS provider. Please feel free to contact me or my staff if you have questions or need additional information. Let us know what you'd like to see included in this newsletter by e-mailing us at emsnews@adph.state.al.us. We can't address your concerns if we don't know them.

Dennis Blair, Director
Office of EMS and Trauma

MEETINGS & EVENTS

State Emergency Medical Control Committee Meeting, June 5, CANCELLED

State Emergency Medical Control Committee Meeting, Sept. 25, 1 p.m., Alabama Power Conference Center-Clanton, AL

EMS Prepares – Upcoming one-day training course available to all EMS providers. Learn more about your role in emergency situations. Sites to be announced soon. Keep an eye on [www.adph.org/ems/ Notices & Events](http://www.adph.org/ems/Notices%20&%20Events) for more information. The following dates have been scheduled:

June 28 Huntsville

July 12 Montgomery

July 18 Mobile

EVOIC Instructor's Course- June 19-20, Montevallo. Check Notice & Events on www.adph.org/ems for more details.

STATE EMS MEDICAL DIRECTOR'S UPDATE

The past nine months have been extremely busy since I became the State EMS Medical Director. Legislation to establish a statewide trauma system has passed and is awaiting the Governor's signature. At present, the only trauma system operating in Alabama is in the BREMSS region, but the North Regional Trauma System should go online very soon. To date, the statewide trauma system development has been based on a voluntary regional system approach. The Trauma Council will continue this regional, voluntary approach. Our goal is to have a statewide trauma system in place by the end of 2008.

The 4th Edition Protocols are now online. The protocol changes and instructions for the update training are available to EMS providers on our Web site www.adph.org/ems. Services should make their medical directors aware of these changes as soon as possible.

We've tried to simplify the update training process as much as possible:

- When all of the affected EMS service personnel have completed the update training, a letter signed by both the off-line medical director and the training officer stating that the service is 100 percent trained and ready to be turned on, along with a completed roster, should be submitted to the regional EMS agency.

- Each service is responsible for issuing its personnel "4th Edition Protocol Update Training" certificates of completion (for license renewal purposes).

- Each service will be notified by the regional agency when they can begin using the new protocols. Individuals from a service cannot utilize the protocols until the ENTIRE SERVICE has been trained and approved.

● All services must be updated by Oct. 1, 2007.

Here's a brief list of the protocol changes:

1. Basic EMTs allowed to use Blind Insertion Airway Devices and Hemostatic agents (optional), and site maintenance of heparin/saline locks.

2. Intermediate EMTs allowed to use adult and pediatric IO devices, can perform 12-lead EKGs (optional), use hemostatic agents (optional), and use CPAP (optional).

3. Paramedics can use adult and pediatric IO devices, hemostatic agents (optional) and CPAP (optional).

4. Vasopressin can be used for PEA and Asystole (optional).

5. Sodium Bicarbonate and Calcium Gluconate have been made category A for cardiac arrest.

6. Morphine has been made category A for severe adult pain (optional).

7. Head trauma patients with GCS less than 9 should be intubated only if there is going to be a long transport and you can't maintain pulse ox reading of more than 95 percent.

8. Intubated patients or patients receiving BVM ventilation should be ventilated at a rate of eight breaths per minute unless you have capnography. If you have capnography, you may vary ventilation rate to maintain CO2 level of 35-45.

9. Added new protocols for use of hemostatic agents, treatment of nausea and vomiting, BIADs, Adult IO, and CPAP.

10. Changed Death in Field protocol to include not moving a body until law enforcement and coroner agree. If CPR is stopped during transport the OLMD physician giving that order must pronounce the patient.

11. Added new section on acceptable equipment and devices.

12. Rapid Sequence Intubation protocol added for critical care services only.

Hopefully, we won't be making more protocol changes anytime soon. If you have questions regarding these changes, please don't hesitate to call me or members of the OEMST staff.

John Campbell, M.D.
AL EMS Medical Director

PROVIDER SERVICES UPDATE

Regarding the Purchase of Fluids & Drugs.....As a result of recent EMS rule changes, some ALS providers are purchasing controlled substances from outside sources. According to the DEA, however, there is now one additional requirement which providers must meet in order to purchase via this method.

Check out our Web site to find out more about these changes. To access, go to www.adph.org/ems. Then go to Provider Application and continue paging until you reach h. PURCHASING where the new steps for the purchase of Schedule III, IV & V controlled substances are outlined.

New Provider Service Application.....The following section has been added to the Provider Application for Licensure:

ALABAMA INCIDENT MANAGEMENT SYSTEM AGREEMENT

AIMS AGREEMENT: The MOUs can be found at the OEMST Web site: www.adph.org/ems. After accessing the site, go to the AIMS link found on the left-hand column. Please sign and return either one or both of the Memorandums of Understanding (MOUs), signature pages, annually with the renewal application.

Coordinated Deployment of Ambulances: YES ___ NO ___

Medical Needs Shelter: YES ___ NO ___

Current AIMS e-mail address: _____

If your service agrees to be available to Standup for the Coordinated Deployment of Ambulances or Medical Needs Shelters during an incident or disaster, please make certain you provide a current e-mail address, which will be monitored at all times by the primary AIMS contact person. _____

NOTE: If your service e-mail address has changed since you signed an AIMS MOU, please contact Earl Langley with your new e-mail address. Hurricane season is here!

ALABAMA'S LICENSED EMTS

- BASIC: 5,830
- INTERMEDIATE: 657
- PARAMEDIC: 3,559
- Total Licensed EMTs: 10, 046

INDIVIDUAL EMT LICENSURE UPDATE

Coming this Fall....OEMS&T is working with Alabama Interactive, Inc. to establish a "read only" web page to view EMTs' license level and status availability. Further details will be forthcoming.

To date, 5,263 Alabama EMTs have renewed their licenses this year. Of these, 1,500 were processed online. Remember, the online renewal is only available January 1-March 31.

As a reminder, the \$50 renewal late fee will be accepted only on renewals post-marked May 31 or earlier.

LICENSED EMS SERVICES IN ALABAMA

- ALS Transport: 189
- ALS Non-Transport: 12
- BLS Transport: 16
- BLS Non-Transport: Unknown

COMPLIANCE & INVESTIGATIONS

In the past nine months, our office has investigated 37 complaints. With 20 known cases, impairment continues to be the leading cause of EMT license suspensions. If you think that you or a member of your service may have an impairment issue, please contact Mark Jackson of our staff. Don't wait until it's too late to ask for help.

Facts about NEMSIS Compliant Software & Alabama e-PCR

There seems to be a tremendous amount of confusion regarding the new data collection system that we're currently piloting. While it may seem to some of you that this is more than you really want to know, the following information is offered in an attempt to clarify the confusion:

NEMSIS is an acronym for National EMS Information System. NEMSIS IS NOT a physical software program for collecting prehospital patient care reports.

NEMSIS IS a standardized set of data elements developed by the federal government so that all states can collect and accept similar data elements.

NEMSIS IS a data format that is based on an "open architecture approach." This means that services that choose to use software other than the "free" OEMS&T version (AL ePCR) must choose a vendor that meets the NEMSIS compliance standards.

Software vendors must prove their compliance by passing specific software standards tests. These tests are available at the NEMSIS Web site (<http://www.nemsis.org/>) and the Alabama data compliance link (<http://www.emsis.net/alabama>). Also, at the NEMSIS Web site, is a list of software vendors that have already passed the NEMSIS compliance testing and have been labeled "Gold" or "Silver" compliant. Gold compliant software is capable of delivering all of the NEMSIS data set, whereas Silver compliant software meets

the minimum acceptable data set.

In addition to NEMSIS compliance, vendor EMS software must pass the Alabama validation tables. There are currently about 100 validations related to state compliance testing. Validations help keep data clean by preventing illogical data entry such as pregnant males, dead people with respirations, etc.

EMSIS, often confused with NEMSIS, is the name of Alabama's previous (old) Patient Care Reporting (PCR) software. When it was implemented in 2001, EMSIS, EMS Information System, was unique to Alabama and Mississippi. At the time, there was no national standard version of an electronic PCR. In short, it didn't work well with other software or third party vendor packages.

The next generation of Alabama PCR software will be called the "Alabama ePCR" and will be "Gold" compliant with the NEMSIS specifications. This doesn't mean that NEMSIS "Silver" compliant vendors will be prohibited from participating, but they will have to do some extra work to become compliant.

Third-Party Vendors

We've been working with a number of vendors with EMS clients in Alabama to test their software for compliance. We'll expect all clients who have purchased these products to begin full compliance data reporting as soon as their vendors pass both NEMSIS and Alabama compli-

ance testing. Full compliance data reporting is defined as completing an ePCR on every patient contact by the end of (and no later than) that EMT report writer's shift duties.

Personal Computers and Web Application

The AL ePCR software will be given FREE to providers and is available in desktop and Web-based versions. Each service provider not using a NEMSIS compatible software vendor is expected to become compliant in usage of either the desktop or Web-based version of the Alabama ePCR shortly after we establish a final release date.

The Bottom Line.....

The OEMS&T will supply the data collection software, address training issues and provide technical support to all EMS providers. All providers are required (by EMS Rules) to participate in the ePCR program. The expected goal for full compliance is Fall 2007.

Chris Lochte will be the primary contact for technical support and can be reached at our office at (334) 206-5383. If you are unable to get in touch with Chris or if you have other issues, contact Mike Daughtry or Russell Crowley.

EMPLOYMENT OPPORTUNITIES

The register is now open for the Emergency Medical Services Specialist-40721 classification and we have four (4) positions that we need to fill. So, don't delay, go to www.personnel.state.al.us and see how to apply!

The requirements have been changed to allow work experience to be substituted for educational requirements (college degree). Pay range- \$29,392.80-\$50,404.80. If you're already employed and your salary is above the entrance level pay of this classification, provisions can be made to hire you at or above your current salary.

State benefits and holiday schedules are also available on the State Personnel website. If you're interested in becoming part of our State EMS Office team but have questions, please feel free to call Dennis Blair or Russell Crowley at (334) 206-5383.